

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if different)

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

Form Approved
OMB No. 2040-0004
Expires 2-29-84

NAME CYPRUS THOMPSON CREEK MINING C
ADDRESS P.O. BOX 62
CLAYTON ID 83227

(2-16)

(17-19)

1D0025402

001 A

PERMIT NUMBER

DISCHARGE NUMBER

FACILITY
LOCATION

FROM

YEAR MO DAY
88 04 01

TO

YEAR MO DAY
88 04 30

(20-21) (22-23) (24-25)

(26-27) (28-29) (30-31)

MAJOR (SUBR) MAY 16 1988

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53)			WATER COMPLIANCE SECTION (54-61)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. OF ANALYSIS (62-63) (64-68)	SAMPLE TYPE (69-70)
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	*****	*****		7.0	*****	7.3		0 weekly grab	
	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	7.0 MAXIMUM	SU	WEEKLY	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	3	4		0 weekly grab	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	20 DAILY AV	30 DAILY MX MG/L		WEEKLY	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.143	0.492		*****	*****	*****		0 daily	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX MGD		*****	*****	*****	****	DAILY	
	SAMPLE MEASUREMENT					7.0	3.0			
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT SEE 18 USC § 1001 AND 33 USC § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

DATE

P. H. Fitch
TYPED OR PRINTED

AREA CODE 208 NUMBER 838-2200 YEAR 88 MO 05 DAY 13

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

NO DISCHARGE OF FLOATING SOLIDS OR VISIBLE FOAM IN OTHER THAN TRACE AMOUNTS.

NAME CYPRUS THOMPSON CREEK MINING C

(2-16)

(17-19)

ADDRESS P.O. BOX 62

ID0025402

002 A

CLAYTON ID 83227

PERMIT NUMBER

DISCHARGE NUMBER

FACILITY

LOCATION

ATTN: BERT DOUGHTY, ENVIRON. SUPERV.

MONITORING PERIOD

FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	88	04	01		88	04	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

MAY 16 1988

MAJOR (SUBR 03)

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUALITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
PH	SAMPLE MEASUREMENT	*****	*****		6.8	*****	7.3		0 weekly	grab
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	6.5 MINIMUM	*****	9.0 MAXIMUM		0 weekly	grab
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	7	13		0 weekly	grab
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	****	*****	20 DAILY AV	30 DAILY MX		0 weekly	grab
FLOW, CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.744	1.650		*****	*****	*****		0 weekly	grab
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	REPORT DAILY MX	MGD	*****	*****	*****		0 weekly	grab
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT		1.65							
	SAMPLE MEASUREMENT		50							
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									

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TELEPHONE

DATE

P. H. Fitch

TYPED OR PRINTED

SIGNATURE OF PRINCIPAL EXECUTIVE

OFFICER OR AUTHORIZED AGENT

208

AREA CODE

838-2200

NUMBER

88

YEAR

05

MO

13

DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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